PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/528,054			Filing Date 03/17/2005		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OR		HER THAN ALL ENTITY	
FOR			NUMBER FI	LED	NUMBER EXTRA	,	Т	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A			N/A]	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A]	N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A			N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			mir	nus 20 = *			ſ	x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	inus 3 = *			I	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE is	sheets of pap s \$250 (\$125 additional 50	wings exceed eation size fee of tity) for each ction thereof. S 37 CFR 1.16(s	due iee								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							L]			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAI (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	04/16/2007	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESEI LY EXTR		l	RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 27	Minus	~ 20	= 7		I	x \$ =		OR	X \$50=	350	
	Independent (37 CFR 1,16(h))	• 2	Minus	3	= 0		[x \$ =		OR	X \$200=	0	
ΜĒ	Application Size Fee (37 CFR 1.16(s))						I						
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						ſ			OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	350	
(Column 1) (Column 2) (Column 3)													
_		CLAIMS REMAININ AFTER AMENDME	VG	HIGHEST NUMBER PREVIOUS PAID FOR	PRESEI		l	RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Z.	Total (37 CFR 1,16(i))		Minus	**	=		I	x \$ =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1,16(h))	٠	Minus	***			[x \$ =		OR	x s =		
Ш	Application Size Fee (37 CFR 1.16(s))]			
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						I			OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 11	* If the entry in column 1 is less than the entry in column 2, write 10° in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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